DUTCHESS COUNTY
DEPARTMENT OF EMERGENCY RESPONSE
9-1-1 ADDRESSING OFFICE

***** APPLICANT IS RESPONSIBLE FOR SUBMITTING DIRECTLY TO "911" *****

Office Phone: (845) 486-6532 Fax Number: (845) 486-6529
392 Creek Rd., Poughkeepsie, New York 12601 emergresponse911@co.dutchess.ny.us

Name of Firm or Person requesting address information: _____

Contact Person: _____ Date: _____

Office Phone #: _____ Fax: _____

TO BE FILLED IN BY PERSON REQUESTING NEW ADDRESS:

1. Type of Request: ( ) Resale ( ) New Construction
   ( ) Sub-division ( ) Other _____

2. Real Property Tax Parcel Grid Number:

   13- _____ - _____ - _____ - _____ - **0000**
   Town Code (4) Section (4) Subsection (2) Block (6)

   Filed Map Number (if available): _____ Lot #: _____

3. Parcel Old Address (if applicable):

   _____

4. Former Owner of parcel or structure:

   _____

5. New Owner of parcel or structure:

   _____

6. <u>Attach a plot plan showing actual location of driveway</u>:

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TO BE COMPLETED BY 9-1-1 STAFF MEMBER:

New assigned 9-1-1 address: _____

Name of Technician: _____ Date Assigned: _____